

AMERICAN CITIZEN REGISTRATION, U.S. STATE DEPARTMENT
mail U.S. EMBASSY TOKYO, Box 205 PPT, TOKYO 107-8420 JAPAN or fax 03-3224-5856

LAST, FIRST MIDDLE NAMES _____

JAPAN ADDRESS _____

BIRTHPLACE _____ BIRTHDATE _____

PASSPORT # _____ ISSUE DATE _____ EXPIRY DATE _____

PHONE HOME/WORK _____

MARITAL STATUS _____ GENDER _____ ESTIMATED MONTH/YEAR DEPART JAPAN _____

ADDITIONAL U.S. CITIZEN FAMILY MEMBERS RESIDING WITH YOU IN JAPAN

NAME _____ RELATIONSHIP _____

BIRTHPLACE _____ BIRTHDATE _____

PASSPORT # _____ ISSUE DATE _____ EXPIRY DATE _____

NAME _____ RELATIONSHIP _____

BIRTHPLACE _____ BIRTHDATE _____

PASSPORT # _____ ISSUE DATE _____ EXPIRY DATE _____

NAME _____ RELATIONSHIP _____

BIRTHPLACE _____ BIRTHDATE _____

PASSPORT # _____ ISSUE DATE _____ EXPIRY DATE _____

EMERGENCY CONTACT OR "I DECLINE TO PROVIDE CONTACT INFO ☐"

NAME _____ RELATIONSHIP _____

US ADDRESS _____

PHONE HOME/WORK _____

PRIVACY ACT STATEMENT This information's purpose to create an official record of U.S. citizenship which will enable consular and diplomatic officers to promptly and efficiently furnish all services which are the inherent right and privilege of such citizenship. Specific purposes for the collection of this information include: establishment of entitlement to services consistent with the U.S. citizenship in event of the registrant's death, protection of and assistance to U.S. citizens abroad, particularly in emergency situations. This information is made available on a need-to-know basis to officials of the U.S. State Department and to other government agencies having statutory or other lawful authority to such information in the performance of their official duties, and to wardens designated by consular officials at U.S. embassies or consulates. Furnishing the information on this form is voluntary, but failure to do so may preclude or impair U.S. government officials or other designated representatives from providing the services described in this statement.

AUTHORIZATION FOR THE RELEASE OF INFORMATION UNDER THE PRIVACY ACT In the event other persons request information regarding my welfare or whereabouts, I hereby authorize the U.S. Department of State and the U.S. Embassy Tokyo to contact the following persons (please state "all," "none" or otherwise specify desired contacts):

FAMILY _____

CONGRESS _____

LEGAL REPRESENTATIVE/MEDIA _____

ADULTS'

SIGNATURES _____ **DATE** _____

FOR FURTHER INFO PLEASE SEE US ON THE WEB AT [HTTP://TRAVEL.STATE.GOV](http://TRAVEL.STATE.GOV)